

LAW ENFORCEMENT OFFICERS KILLED OR ASSAULTED

OFFICERS KILLED Number of your law enforcement officers killed in the line of duty this month.	By felonious act _____ By accident or negligence _____
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Type of Activity	Total Assaults by Weapon A	Type of Weapon					Two-Officer Vehicle F	Type of Assignment						Police Assaults Cleared M		
		Firearm B	Knife or Other Cutting Instrument C	Other Dangerous Weapon D	Hands, Fists, Feet, etc. E			One-Officer Vehicle		Detective or Special Assignment		Other				
								Alone G	Assisted H	Alone I	Assisted J	Alone K	Assisted L			
1 Responding to "Disturbance" calls (family quarrels, man with gun, etc.)																
2 Burglaries in progress or pursuing burglary suspects																
3 Robberies in progress or pursuing robbery suspects																
4 Attempting other arrests																
5 Civil disorder (riot, mass disobedience)																
6 Handling, transporting, custody of prisoners																
7 Investigating suspicious persons or circumstances																
8 Ambush - no warning																
9 Mentally deranged																
10 Traffic pursuits and stops																
11 All other																
12 TOTAL (1 - 11)																
13 Number with personal injury																
14 Number without personal injury																
15 TIME OF ASSAULTS	AM															
	PM															

12:01
2:00
4:00
6:00
8:00
10:00
12:00

Complete this block with your agency's incident or case number(s) if the assaulted officer(s) was injured with a firearm or a knife or other cutting instrument.			

AGENCY NAME

AGENCY ORI

MONTH AND YEAR OF REPORT

POINT OF CONTACT NAME

PHONE NO.